



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**  
KENNETH HAHN HALL OF ADMINISTRATION  
500 WEST TEMPLE STREET, ROOM 437  
LOS ANGELES, CA 90012



**MARK J. SALADINO**  
TREASURER AND TAX COLLECTOR

## ADOPTED

BOARD OF SUPERVISORS  
COUNTY OF LOS ANGELES

September 14, 2010

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

#16 SEPTEMBER 14, 2010

*Sachi A. Hamai*  
SACHI A. HAMAI  
EXECUTIVE OFFICER

Dear Supervisors:

**DEPARTMENT OF TREASURER AND TAX COLLECTOR:  
REQUEST TO ACCEPT COMPROMISE OFFERS OF SETTLEMENT  
(ALL DISTRICTS AFFECTED)  
(3 VOTES)**

### **SUBJECT**

Individuals who were injured in a third party compensatory accident received medical care at a County facility. The Treasurer and Tax Collector entered into negotiations with the liable parties and reached a settlement agreement.

### **IT IS RECOMMENDED THAT YOUR BOARD:**

Pursuant to Section 1473 of the Health and Safety Code, authorize acceptance of the compromise offers of settlement from the following individuals who were injured in a third party compensatory accident and who received medical care at a County facility:

1. Account Number 11402851 in amount of \$68,499.60
2. Account Number 11789081 in amount of \$5,000.00
3. Account Number 11199729 in amount of \$24,995.94
4. Account Number 10595487 in amount of \$3,506.09
5. Account Number 11931340 in amount of \$18,921.43
6. Account Number 12107596 in amount of \$8,293.88

### **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

The best interest of the County would be served by the approval of this recommendation and the County Counsel concurs. The compromise offers of settlement are recommended because the patients, estates, or legally responsible relatives are unable to pay the charges.

**Implementation of Strategic Plan Goals**

This action is consistent with the Countywide Strategic Plan Goal of Fiscal Responsibility in pursuing collection of charges owed for County services.

**FISCAL IMPACT/FINANCING**

The County will recover partial payments from third parties against debts, otherwise uncollectible due to the limited financial resources of the individuals who received the medical care.

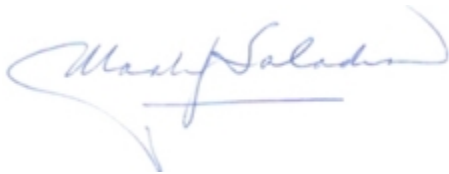
**FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

Not applicable.

**IMPACT ON CURRENT SERVICES (OR PROJECTS)**

No impact.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Mark J. Saladino", with a horizontal line underneath the name.

MARK J. SALADINO  
Treasurer and Tax Collector

MJS:KG:ke

Enclosures

c: Chief Executive Officer  
Auditor-Controller  
County Counsel



## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 109A

Amount of Aid	\$347,125.00	Account Number	11402851
Amount Paid	0.00	Name	Adult Male
Balance Due	347,125.00	Service Date	09/12/06 thru 07/03/07
Compromise Amount Offered	68,499.60	Facility	LAC USC Medical Center
Amount to be Written Off	\$278,625.40	Service Type	Inpatient/Outpatient

### JUSTIFICATION

The client was involved in an accident resulting in electrocution. He was treated at LAC USC Medical Center at a cost of \$347,125.00. There was no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$307,500.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$123,000.00	\$123,000.00	40.00%
Attorney Cost	104,869.80	96,710.00	31.45%
Nachman Brautbar, M.D., Inc.	1,034.00	344.67	0.11%
Edwin Haronian, M.D., Inc.	1,418.00	472.67	0.15%
Thomas Curtis, M.D., Inc.	1,759.00	586.33	0.19%
City of Los Angeles Fire Dept.	947.00	315.67	0.10%
LAC USC Emergency Room	60.00	20.00	0.01%
Grossman Medical Group Inc.	2,038.38	679.46	0.22%
Samer Alaiti, M.D., Inc.	1,691.00	563.67	0.18%
County of Los Angeles	347,125.00	68,499.60	22.28%
Net to Client	N/A	16,307.93	5.31%
<b>Total</b>	<b>\$583,942.18</b>	<b>\$307,500.00</b>	<b>100.00%</b>

Our financial investigation reveals that the client is unemployed and is scheduled to serve a two-year prison sentence for an unrelated matter. He has no other source of income or tangible assets.



### DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 109B

Amount of Aid	\$33,324.00	Account Number	11789081
Amount Paid	0.00	Name	Adult Male
Balance Due	33,324.00	Service Date	07/05/08 thru 02/05/09
Compromise Amount Offered	5,000.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$28,324.00	Service Type	Inpatient/Outpatient

### JUSTIFICATION

The client was involved in an automobile versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$33,324.00. There was no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$5,000.00	33.33%
Attorney Cost	879.57	Waived	0.00%
County of Los Angeles	33,324.00	5,000.00	33.33%
Net to Client	N/A	5,000.00	33.34%
<b>Total</b>	<b>\$39,203.57</b>	<b>\$15,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that the client is unemployed and earns minimal payment performing odd jobs. There is no other source of income or tangible assets.



## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 109C

Amount of Aid	\$55,538.00	Account Number	11199729
Amount Paid	0.00	Name	Adult Male
Balance Due	55,538.00	Service Date	12/27/05 thru 01/03/06
Compromise Amount Offered	24,995.94	Facility	LAC USC Medical Center
Amount to be Written Off	\$30,542.06	Service Type	Inpatient

### JUSTIFICATION

The client was involved in a bicycle versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$55,538.00. There was no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$95,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 38,000.00	\$38,000.00	40.00%
Attorney Cost	7,995.00	7,995.00	8.42%
Michael Shiffman, M.D.	5,000.00	3,500.00	3.68%
Jose Vialobos, D.C.	4,000.00	3,300.00	3.47%
American Medical Response	980.00	980.00	1.03%
Key Health Management (MRI)	1,200.00	1,200.00	1.26%
County of Los Angeles	55,538.00	24,995.94	26.32%
Net to Client	N/A	15,029.06	15.82%
<b>Total</b>	<b>\$112,713.00</b>	<b>\$95,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that the client is unemployed and receives public assistance. He has no other source of income or tangible assets.



### DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 109D

Amount of Aid	\$26,440.00	Account Number	10595487
Amount Paid	0.00	Name	Adult Male
Balance Due	26,440.00	Service Date	08/21/01 thru 09/01/01
Compromise Amount Offered	3,506.09	Facility	LAC USC Medical Center
Amount to be Written Off	\$22,933.91	Service Type	Inpatient

### JUSTIFICATION

The client was involved in a automobile versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$26,440.00. There was no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$ 4,833.33	32.22%
Attorney Cost	500.00	500.00	3.33%
Multicare Medical of East L.A.	5,313.00	2,000.00	13.33%
Albert Washington, M.D.	2,373.00	1,100.00	7.33%
M. Hamidy, M.D.	1,700.00	850.00	5.67%
American Medical Response	629.25	629.25	4.20%
County of Los Angeles	26,440.00	3,506.09	23.37%
Net to Client	N/A	1,581.33	10.55%
<b>Total</b>	<b>\$41,955.25</b>	<b>\$15,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that the client supports himself with a marginal income. He has no other source of income or tangible assets.



## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 109E

Amount of Aid	\$57,338.00	Account Number	11931340
Amount Paid	0.00	Name	Adult Male
Balance Due	57,338.00	Service Date	09/25/07 thru 10/10/07
Compromise Amount Offered	18,921.43	Facility	LAC USC Medical Center
Amount to be Written Off	38,416.57	Service Type	Inpatient/Outpatient

### JUSTIFICATION

The client was injured in an accidental explosion. He was treated at LAC USC Medical Center at a cost of \$57,338.00. There was no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$65,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$18,320.00	\$ 18,320.00	28.18%
Attorney Cost	5,082.37	5,082.37	7.82%
Pomona Valley Hospital	2,919.70	1,420.00	2.18%
CA ER Physicians Group	306.00	150.00	0.23%
County of Los Angeles	57,338.00	18,921.43	29.11%
Net to Client	N/A	21,106.20	32.48%
<b>Total</b>	<b>\$83,966.07</b>	<b>\$65,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that the client supports himself with a marginal income working as a handyman. He has no other source of income or tangible assets.



## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 109F

Amount of Aid	\$143,282.00	Account Number	12107596
Amount Paid	0.00	Name	Adult Male
Balance Due	143,282.00	Service Date	05/02/09 thru 06/18/09
Compromise Amount Offered	8,293.88	Facility	LAC USC Medical Center
Amount to be Written Off	\$134,988.12	Service Type	Inpatient/Outpatient

### JUSTIFICATION

The client was involved in an automobile versus pedestrian accident. He was treated at LAC USC Medical Center at a cost of \$143,282.00. There was no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$25,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 8,333.33	\$ 8,292.11	33.16%
Attorney Cost	123.66	123.66	0.50%
County of Los Angeles	143,282.00	8,293.88	33.18%
Net to Client	N/A	8,290.35	33.16%
<b>Total</b>	<b>\$151,738.99</b>	<b>\$25,000.00</b>	<b>100.00%</b>

Our financial investigation reveals that the client supports himself with a marginal income received from Social Security benefits. He has no other source of income or tangible assets.